## **Disclosure Report Cover**

Amendment

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information			XLE 1975 2000 无为其的国际
a. Full Name			c. ID Number
PEDRO R. MORE	1 FOR COMMISSION	IER	1JM61K
b. Mailing Address (include City, State	and Zip Code)		d. Date Filed
8007 DENHOLME DR			10/28/19
WAXHAW, NC. 281	173		e. Phone Number 828 - 610 - 5421
2 Danout Voor 2 Daniel Chant	Date / 111 14 Davied	End Date : 111   5 Treasure	er Full Name
2. Report Year 3. Period Start	10	0/21/19	er run Name
6. Type of Committee (Check O		port (check only one type of rep	ort from one category)
Candidate Campaign Party		State/County	Referendum
The state of the s	erendum Organizatio	nal Organizational	Organizational
☐ Independent Expenditure ☐ Join	t Fundraiser	lay Quarterly	Pre-referendum
Legal Expense Fund	Pre-primary	First	☐ Final
7 M 6 N 1 //2 N 11	Pre-election	Second	Supplemental Final
7. Type of Fund (if applicable,  Booster Fund		Third	Annual
Building Fund	Semi-annua Mid Y		Special
Dunding I und	Year E	- 200 A	10. Special Report Name
Other:	Final	Year End	10. Special Report Name
8. Number of Fundraisers this	Report Special	Final	
\$ 0,00		Special	
11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
5/3 BANK		RECEIVED	)
b. Purpose	c. Account Code	b. Purpose	c. Account Code
CHECKING ACCOUNT	197308	OCT 2 8 2019	
	d. Perjod Begin Balance	Union Co. Board of Elections	d. Period Begin Balance
	\$ 14.21	Official Co. Board of Electron	\$
CERTIFICATION		CALLET STATE STORES AND SECURIOR SAN	
I certify that the Committee or Fur of the NC General Statutes and the report is complete, true and correct Printed Name of Sign	at no funds are commingled with and that I have been trained the second	plicable provisions of Article 22A, 22 th prohibited or other non-disclosed by the NC State Board of Elections.  UND L  ignature of Appointed Treasurer	
FOR OFFICE USE ONLY	1-1	11/00	
Date Received:	128 19 Empl	oyee: De De	Normal Mail
Date Postmarked:	Empl	oyee:	Registered Mail Hand Delivered
Date Scanned: 10/2	8/19 Empl	oyee: Aby	Electronically Filed
Date Data Entered:	Empl	oyee:	Signer has not received mandatory training
assistant	treasurer, custodian of boo	mittee information such as the co- ks information, or account inform on (CRO-2100A-E) to make com	ation.

## **Detailed Summary**

Amendment

Yes No

Use this form to summarize all disclosure reporting forms and			
1. Copymittee Full Name (and Fund if applicable)	2. Type of	. 0	ID Number
PEDRO 11 MORE JAOR COMMISSIONER	MEELE	GTOY KEROUT	1JM51K
Start of Election Cycle: January 1, <u>2016</u>	_	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 14.21	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 817,02	\$ 217.02
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$ 1100,00	\$ 4200.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	,11d and 11e)	\$ 1317.02	\$ 1417.02
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 1019.52	\$ 1105.31
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$ 117.02	\$ 117.02
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 1136.54	\$ 1222.33
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$ 194.69	\$ 19469
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 1200.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee 25) Administrative Support NOV 0 2 2019	(CRO-1720)	\$	
25) Administrative Support NUV 0 Z 2015	(CRO-1710)	\$	\$
26) Forgiven Loans Union Co. Board of Elections	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

Cont	ributions fr	om Individual	S	Pg	of	Amendment Yes	No
Name of Street Orange of the Owner,	THE RESERVE AND PARTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN	ndividual contribution	THE PARTY NAMED IN COLUMN TWO IS NOT THE OWNER.	ontributions und	er \$50 if form Cl	CONTRACTOR OF THE PARTY OF THE	
1. Committee Full Name (and Fund if applicable)					2. ID Number		
PEV	NOK.More	ey ton Canmi	SSIDNEOR			LJM51K	_
	tributor Informa			Add Rei			
A STATE OF THE STA	ame, Mailing Addro de city, state, & zip)	ess & Phone		b. Job Title/Profe	ssion	d. Comments	
7	MOR R. MOR	M		RETIRE	-O		
		7		c. Employer's Nar			
	007 DENHOU					e. Election Sum to Da	te
u	AXHAW, 1	16,28173				\$	
f. Prior	a Assessmt Code	h Form of Downson	i i- Vi-i Di		I: D. 4 ( (11/		
_	g. Account Code		i. In-Kind Descrip	Control of the Contro	j. Date (mm/dd/yy)		
	197308	CASH	SIGN	5	10/14/10	3 \$ 117.	02
					,	\$	
						\$	
3. Con	tributor Informa	ation		Add Re	move	The state of the s	
100 100 100	ame, Mailing Addre	ess & Phone		b. Job Title/Profe	ssion	d. Comments	
_	de city, state, & zip)			RETIRE	7)		
	-HARRESOH			c. Employer's Nar			
	BELLE FOR					Floriday Court D	
WE	DUNGTON, N	16,28173				e. Election Sum to Da	te
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yy	yy) k. Amount	
		CHECK			10/14/19	\$ 100.0	20
						\$	
						\$	
3. Cont	tributor Informa	ation		Add Rei	nove		
	ame, Mailing Addre de city, state, & zip)	ess & Phone		b. Job Title/Profe	ssion	d. Comments	
(includ		OFIVED.					
	RE	CEIVED		c. Employer's Nar	ne/Specific Field		
	NC	OV 02 2019				e. Election Sum to Da	te
	140					\$	Managara da de la companya da dela
f. Prior	g. Account Code	h. Form of Payment	In Vind Descrip	70 M. Hardes House (1986)	I: D-t- (/14/		
	g. Account Code	n. Form of Payment	i. In-Kind Descrip	ouon	j. Date (mm/dd/yy	(yy) k. Amount	
						\$	
						\$	
4. Tot	tal only this P	age	<b>一种能量的</b> 这			\$ 217,02	
The second second		RO-1210 Pages					
		of Detailed Summary Pag	ge CRO-1100)			\$ 217.02	

Loan Proceeds		Pg of	Amendment  Yes No
Use this form to report proceeds from a loan and	loan endorser's informa	tion	
A loan proceeds statement must accompany each		ividual	
1. Committee Full Name (and Fund if applicab			2. ID Number
Passo R. Money top Commission	NER		
3. Lender Information	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	Remove	<b>建</b> 有一种的重要的。
a. Full Name, Mailing Address & Phone	b. Job Title	/Profession	d. Comments
(include city, state, & zip)	Derro	-A	
Persed R. Morrey	KETRE	73	
Long A	c Employer	's Name/Specific Field	e. Start Date (mm/dd/yyyy)
8007 Degretolineese.	C. Zimpioyer	3 Name/Specific Free	10/1/19
WAXHUW, NC, 28173			f. End Date (mm/dd/yyyy)
			12/1/19
a Pata la Constitu District		I. a. a.	
g. Rate h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount
1 0 %   M/A	0 % M/A 197308 CASH		\$ 1,100
I. Full Name of Lending Institution			m. Loan Number
4. Endorsers/Makers (The people who guarantee th			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/	/Profession	c. Employer's Name/Specific Field
(include city, state, & zip)	<b>据是是是产生的</b>		
	d. Percentag	ge	e. Amount
	%   9		\$
EUN VIII IV OR			
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/	Profession	c. Employer's Name/Specific Field
RECEIVED			
11202			
NOV 02 2019			
	d. Percentag	ge	e. Amount
Union Co. Board of Elections		%	\$
a. Full Name, Mailing Address & Phone	b. Job Title/	Profession	c. Employer's Name/Specific Field
(include city, state, & zip)	b. Job Tide	Troicssion	c. Employer's Name/Specific Field
	d. Percentag	ge	e. Amount
		%	\$
a. Full Name, Mailing Address & Phone	b. Job Title/	Profession	c. Employer's Name/Specific Field
(include city, state, & zip)			
	d. Percentag	re	e. Amount
	a. i ci contag		
		%	\$
5. Total of ALL CRO-1410 Pages			\$ 1100 00
(This line must be on line 9 of Detailed Summary Page C	RO-1100)		\$ 1,100,00

Disbursements					Pgl of	Yes No
			ee for o	perating exp	penses, contributio	ons to candidate/political
committees and coord  1. Committee Full N			South Such		THE SAME AND A STREET	2. ID Number
// // //	1	Commission	HEN			LJM51K
3. Type of Disburser	nent (Please	use separate CR	0-1310	forms for e	each type of Disbu	ursement.)
Operating Expenses	Marine Committee of the	tributions to Candida	tes/Politic	cal Committees	Coord	dinated Party Expenditures
4. Payee Information				Add	Remove	
a. Full Name, Mailing		one		b. Coordinat	ed Committee Name	d. Comments
(include city, state, & zip)						
UISTA PRINT				c. Level Regi	stered (Specify)	
275 ( )VMA)	4 STREET			Federal	County:	11 0000
VISTA PRINT 275 WYMAN WALTHAM I	MAD DOU	57		State	Municipali	ty: e. Election Sum to Date
WACTHAMI	MAILON					\$ 543 20
						017.72
1	rm of Payment	h. Purpose Code		mm/dd/yyyy)	42	k. Required Remarks
197308 CR	est was	H	100	02/2019	\$457.53	
					\$	
4. Payee Information	n de la companya de			Add	Remove	
a. Full Name, Mailing Ad	ldress & Phone			b. Coordinat	ed Committee Name	d. Comments
(include city, state, & z	ip)					
HOLMS CUSTON	m Propert	5				
FIVUIS COSIU	" (mulu)	,			stered (Specify)	
				Federal	County:	
				State	Municipali	- ^^
						\$ 33.99
f. Account Code g. For	rm of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	k. Required Remarks
197308 CP	FATTOMEN	Й	10/0	. / .	\$ 33.99	N Required Remarks
141308 CM	ty mes	П	10/0	4/2019	\$ 35.11	
					\$	
4. Payee Information	n			Add	Remove	
a. Full Name, Mailing Ad				b. Coordinate	ed Committee Name	d. Comments
(include city, state, & z		CEN/E	n			
SIGH MAS	TFRS	CLIVE	.U			72.022
0.011. 1/1/	0	CT 2 8 2019			stered (Specify)	
	U	C1 2 0 2019		Federal State	County:  Municipali	ty: e. Election Sum to Date
	Union C	Co. Board of Electi	one	State	Wunterpan	
	Official	o. Board of Electi	OHS			\$ 500.00
f. Account Code g. For	rm of Payment	h. Purpose Code	i. Date (	mm/d <b>d</b> /yyyy)	j. Amount	k. Required Remarks
	. 0 .	A	10/0	14/2019	\$ 500,00	
197308 DE	INT CARDA		, ,	10011	00 1	
197308 OPE	DIT GREVS				2	
					\$	1. 1881
5. Total only this Pag	ge				\$	\$ 997.52
5. Total only this Pag 6. Total of ALL CRO	ge O-1310 Pages					\$ 991.52
5. Total only this Page 6. Total of ALL CRO (This line goes in line 1.	ge O-1310 Pages 3a of Detailed Sum				es)	
5. Total only this Page 6. Total of ALL CRO (This line goes in line 1.) (This line goes in line 1.)	ge O-1310 Pages 3a of Detailed Sum 3b of Detailed Sum	mary Page CRO-110	00 if Con	trib to Candida	es) ates/Political Comm)	\$ 99/.52 \$
5. Total only this Pag 6. Total of ALL CRO (This line goes in line 1.) (This line goes in line 1.) (This line goes in line 1.)	ge O-1310 Pages 3a of Detailed Sum 3b of Detailed Sum 3c of Detailed Sum	mary Page CRO-110 mary Page CRO-110	00 if Con 00 if Cool	trib to Candide rdinated Party	es) ates/Political Comm)	
5. Total only this Page 6. Total of ALL CRO (This line goes in line 1.) (This line goes in line 1.) (This line goes in line 1.) 7. Purpose Codes	ge O-1310 Pages 3a of Detailed Sum 3c of Detailed Sum (List detailed	mary Page CRO-110 mary Page CRO-110 expenditure code	00 if Con 00 if Coo e in (h.)	trib to Candido rdinated Party above)	es) ates/Political Comm) Expenditures)	\$
5. Total only this Page 6. Total of ALL CRO (This line goes in line 1.) (This line goes in line 1.) (This line goes in line 1.) 7. Purpose Codes A* - Media	ge O-1310 Pages 3a of Detailed Sum 3b of Detailed Sum 3c of Detailed Sum (List detailed B* - Printin	mary Page CRO-110 mary Page CRO-110 expenditure code	00 if Cont 00 if Cook e in (h.) C* - Fu	trib to Candido rdinated Party above) undraising	es) ates/Political Comm) Expenditures)  D - To A	\$ another Candidate
5. Total only this Page 6. Total of ALL CRO (This line goes in line 1.) (This line goes in line 1.) (This line goes in line 1.) 7. Purpose Codes A* - Media E - Salaries	ge O-1310 Pages 3a of Detailed Sum 3b of Detailed Sum 3c of Detailed Sum (List detailed B* - Printin F* - Equipm	mary Page CRO-110 mary Page CRO-110 expenditure code ng nent	00 if Cond 00 if Cood e in (h.) C* - Fu G - Pol	trib to Candido rdinated Party above) undraising litical Party	es) ates/Political Comm) Expenditures)  D - To A H* - Hol	\$ another Candidate Iding Public Office Expenses
5. Total only this Page 6. Total of ALL CRO (This line goes in line 1.) (This line goes in line 1.) (This line goes in line 1.) 7. Purpose Codes A* - Media	ge O-1310 Pages 3a of Detailed Sum 3b of Detailed Sum 3c of Detailed Sum (List detailed B* - Printin	mary Page CRO-110 mary Page CRO-110 expenditure code ng nent	00 if Cond 00 if Cood e in (h.) C* - Fu G - Pol	trib to Candido rdinated Party above) undraising	es) ates/Political Comm) Expenditures)  D - To A H* - Hol	\$ another Candidate

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IJ	IS	Dι	ırs	en	ner	HS

	)		Ü	Amendment	_
Pg	OX.	of	_	Yes	No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee F	full Name (and Fun	d if applicable)	Bell By			2. ID Number
PEDEUR. MORSEY TOR COMMISSIONER						LJM5/K
3. Type of Disb	ursement (Please	e use separate CF	RO-1310	forms for e	each type of Dis	sbursement.)
Operating Exp	THE RESIDENCE OF THE PERSON OF	ntributions to Candida	ates/Politic	cal Committees	co Co	pordinated Party Expenditures
4. Payee Inform				Add	Remove	
Committee of the Commit	Iailing Address & Ph	none		b. Coordinat	ed Committee Nan	ne d. Comments
(include city, state,	1.					
5/3 BAI	V/C			c. Level Regi	stered (Specify)	parely and
				☐ Federal	County:	:
				State	☐ Municip	pality: e. Election Sum to Date
						\$\$28.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	mm/dd/yyyy)	j. Amount	k. Required Remarks
197308	DUAFT	0	9//	2/19	\$ 1400	SERVICE CHILLE
197308	DEAFT	0	101	10/19	\$ 14.00	STAVE CHURAS
4. Payee Inform	nation			Add	Remove	
	ing Address & Phone			b. Coordinat	ed Committee Nan	me d. Comments
(include city, sta	te, & zip)					
				T 10	1 1 (5 16 )	
				Federal	stered (Specify)  County:	3 H-10-3-3
l				State	Municir	
						December of the Control of the Contr
		-				\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	k. Required Remarks
					\$	
					\$	
4. Payee Inform	nation		П	Add	Remove	
	ing Address & Phone				ed Committee Nan	ne d. Comments
(include city, sta		D				
n	COLIVE					
	OCT 28 2019				stered (Specify)	
	001 20 2010			Federal State	County:	
Unio	n Co. Board of Election	ons		State	Municip	• • • • • • • • • • • • • • • • • • • •
Onio						\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (	mm/dd/yyyy)	j. Amount	k. Required Remarks
					\$	
					\$	
5. Total only th	nis Page					\$ 28.00
						1 00.W
6. Total of ALL CRO-1310 Pages  (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Exp  (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Can			100 if O-	rating Fun	as)	\$ 28.00
			170		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
9.70	line 13c of Detailed Su					a a
	odes (List detailed	The second secon	The Part of the Local Division in which the	THE RESERVE AND PERSONS ASSESSMENT		
A* - Media	B* - Print			undraising	<b>D</b> - To	o Another Candidate
E - Salaries	F* - Equip	oment	G - Po	litical Party	H* - F	Holding Public Office Expenses
I - Postage	J - Penalt	ies	K* - C	Office Exper	ises Q* - I	Donation to Legal Expense Fund
O* Other	no dotoiled ale.	tion in war-t 1	nove - 1	fold (L)		
" Codes requi	re detailed explanat	non in required	remarks	s Heid (K)	ALL CONTROL OF CONTROL	

In-Kind Contributions	Pg	of		Yes No
Use this form to report non-monetary contributions, donations, go	oods or services prov	vided to the com	nittee o	
Use CRO-1215 if In-Kind Contributions were or will be ref 1. Committee Full Name (and Fund if applicable)	funded within / da	ys.	2. I	D Number
PEDEN R. MOREY FOR COMMISSIONET			7.5	1 M 51K
				1 JUSIK
	Add Re			
a. Full Name, Mailing Address & Phone	b. Type of Contri	butor	c. C	omments
(include city, state, & zip)	Individual Candidate			
PEDW R. MOREY 8007 DEHHOLME DR. WAXHAW, NC, 28173	Party			
8007 DETHICKME DIC.	☐ PAC			
1. )nx(14(1). NC, 28172	Referendum		d. E	lection Sum to Date
WAMAN TITLE	Other Receip	t Source	\$	
e. Description		f. Date (mm/dd/	yyyy)	g. Fair Market Amount
CICAIO		1	10	\$ 1700
SIGNS		10/04/	14_	\$ 111,02
				\$
				\$
		move		
a. Full Name, Mailing Address & Phone	b. Type of Contri	butor	c. C	omments
(include city, state, & zip)	Individual			
	Candidate Party			
	PAC			
	Referendum		d. E	lection Sum to Date
	Other Receip	t Source	\$	
P :::				
e. Description		f. Date (mm/dd/	уууу)	g. Fair Market Amount
				\$
				\$
				\$
3. Contributor Information	Add Re	move	To pully	
a. Full Name, Mailing Address & Phone	b. Type of Contri		c. C	omments
(include city, state, & zip)	Individual			
RECEIVED	Candidate			
TILOLIVED	Party			
OCT 2 8 2019	PAC Referendum		d E	ection Sum to Date
	Other Receip	t Source	925	ection Sum to Date
Union Co. Board of Elections			\$	
e. Description		f. Date (mm/dd/	уууу)	g. Fair Market Amount
				\$
				\$
				\$
4. Total only this Page			\$	117 12
5. Total of ALL CRO-1510 Pages			P	111.00
(This line must be on line 17 of Detailed Summary Page CRO-1100)			\$	117.02



## **Loan Proceeds Statement**

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

Name of committee to receive loan: Peno R. Money Fox Commissioner
Person or committee to make loan:      Person or committee to make loan:
Date of loan to committee: 10/1/19
• Name of lending institution and account number (source):
• Amount of loan: 1,100
Description (if in-kind loan):
Names of all parties responsible for payment of loan (guarantors):
Period of loan:
Rate of interest of loan:   O / o
Security pledged for loan:
I, Paw R. Moncey , acknowledge that all of the information (Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan
that has an outstanding balance to any source.  11/2/19
Signature of Lender RECEIVED Date Signed  Signature of Treasurer of Committee NOV 02 2019  Date Signed

Union Co. Board of Elections